EARLY VOTING BALLOT TRANSPORT STATEMENT

~This form is to be completed each time the ballot box seal is broken for ballot transport~

At Location

Election Type: General Election **Election Date:** 11/08/2022

Name of Location: PYLE ADULT RECREATION CENTER #11072 Box 1 of 1 **Arrival Time:** 10:55

Were there ballots to be picked up? [X] YES <If YES, complete lines 1-7 [ ] NO <If NO, complete lines 1-7

Spoils picked up? [X] YES [ ] NONE **Completed Forms picked up?** [ ] YES [X] NONE

1) **Blue Drop Box Seals #** NONE & NONE <Indicate the seal numbers that were **taken off** on blue drop box

2) **Blue Drop Box Seals #** 1522001976 & 1522001975 <Indicate the seal numbers that were **placed** on blue drop box

3) **Red Box Seals #** 1522001986 & 1522001985 <Indicate the seal numbers that were **placed** on ballot transport box

4) **Ballot Box Sealed/Checked on** (Date) 11/7/22 (Time) 10:58 <Date and time box was sealed/checked

5) **Location Staff Member** (Signature) [signature]

6) **Transport Staff Member** (Signature) [signature]

7) **Transport Staff Member** (Signature) David C Dunstanley

Departure Time: 11:02

Transport Receipt

This portion to be completed by the Receiving Agent at the MCTEC Facility

Receiving Agent (Signature) Caron Persoske **Date/Time:** 11/7/22 255
Sign to acknowledge receipt from Transport Staff Member — Date of Audit Match

Ballot Box Seals # 1522001986 & 1522001985 <If applicable, verify the seal numbers on the box match the above from location

Blue Drop Box Seals # NO & seals <Indicate the seal numbers that were **broken** from blue drop box

Count of Ballots in Transport Bin # 81

G-62 W-19

Audit Agent (Signature) [signature] **Date/Time:** 11/7/22 257pm
Sign to affirm seal #'s match *or* that no ballots were to be picked up — Date of Audit Match